BEST AVAILABLE COPY

		Application or Docket Number																
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 48 008008												8						
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN							
TOTAL CLAIMS			20				RAT	ſΕ	FEE	[RATE	FEE						
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	· 710.00						
TOTAL CHARGEABLE CLAIMS			30 minus 20=		. 10		X\$	9=	90,	P R	X\$18=							
IND	EPENDENT CL	AIMS	2 minus 3 =		. 0		X40)=	, , , ,	OR.	X80=							
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+13	5=		OR	+270=							
* If th difference in column 1 is less than zero, enter "0" in column 2							тот		445.	OR OR	TOTAL							
CLAIMS AS AMENDED - PART II								· ·	هليب	U	OTHER	THAN						
(Column 1) (Column 2) (Column 3)								LL E		OR	SMALL E	ENTITY						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RAT	ſΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
N N	Total	*	Minus	**		=	X\$	9=		OR	X\$18=							
ME	Independent	*	Minus	***		=	X40)=		OR	X80=							
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		+13	5-			+270=							
							•	OTAL	e e e e e e e e e e e e e e e e e e e	OR	TOTAL	 						
	(Column 1) (Column 2) (Column 3)							FEE		OR	ADDIT. FEE	-						
		(Column 1) CLAIMS		HIGH	HEST	(Column 3)	1		ADDI-	, 1	7	ADDI-						
MENT B		REMAINING AFTER AMENDMENT		PREVI	MBER HOUSLY FOR	PRESENT EXTRA	RA ⁻	TE	TIONAL		RATE	TIONAL FEE						
	Total	•	Minus	**		=	X\$	9=		OR	X\$18=							
AMEND	Independent	ŀ	Minus	***	T. C	-	X4	0=		OR	X80=	*						
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+13	5=		OR	+270=							
(Column 1) (Column 2) (Column 3)							T	OTAL	2	OR	TOTAL							
							ADDIT.	FEE			ADDIT. FEE							
NT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA	RA*	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
AMENDMENT	Total	AMENDMENT	Minus	**		=	X\$	9=		OR	X\$18=							
ME	Indep ndent	•	Minus	***		=	X44		· · · · · ·	1	X80=	 						
4	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	IT CLAIM]			OR	<u> </u>	 						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	 						
**	If the "High st Nu	ımb r Previously F	Paid For" IN Th	HIS SPACE	is less tha	an 20, ntr"20	O." ADDIT.	OTAL FEE		OR	TOTAL ADDIT. FEE							
	The "Highest Nu	umber Previously F	raiur i IIV II aid Francisch	or Indepen	. 10 ccoi ci . dent) is th	a i o, enter o. e highest numb	er found in t	** If the "High st Numb r Previously Paid For" IN THIS SPACE is less than 20, nt r "20." ***If the "Highest Number Previously Paid F r" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid F r" (T tal or Independent) is the highest number found in the appropriate box in column 1.										